



MERIDIAN TOWNSHIP ASSESSING DEPARTMENT
5151 MARSH RD
OKEMOS, MI 48864

HOPE Application Guidelines

HOMEOWNER POVERTY EXEMPTION (HOPE) APPLICATION REQUIREMENTS

MCL 211.7u requires the governing body of Meridian Township to establish policies and guidelines, which the local assessing unit will use to determine whether to grant a Homeowner Poverty Exemption.

The HOPE is meant to aid residences who have exhausted all resources available to retain home ownership.

To qualify for HOPE, the applicant must be below *both* the Meridian Township Income and Asset Maximum Guidelines. Meridian Township HOPE Policies and Guidelines are available to the public. The Board of Review shall follow the Policies and Guidelines when granting or denying a HOPE application. The guidelines at the time of the application shall be equally applied to each applicant in the Township.

The HOPE Policies and Guidelines include Maximum Income Guidelines and Maximum Asset Guidelines set by Meridian Township, which are used to determine whether HOPE should be granted. Income Guidelines may not be set lower than the Federal Poverty Income Guidelines.

A HOPE may not be granted to property owned by a corporation.

PARTIAL HOMEOWNER POVERTY EXEMPTIONS:

The Meridian Township Board of Trustees has approved a partial (50%) HOPE option. A partial HOPE is an exemption of only a part of the taxable value of the property rather than the entire taxable value.

APPLICATION DEADLINES FOR BOARDS OF REVIEW

Listed below are the dates of the three Board of Review Meetings that occur during the year, and deadlines for your application to be considered. Missing a March or July deadline will result in the application being considered at the following meeting. Failure to meet the application deadline for the December meeting will result in the application being unable to be considered for the tax year.

BOARD OF REVIEW	APPLICATION DEADLINE
March 9-11, 2026	March 1st, 2026
July 21, 2026	July 1st, 2026
December 15, 2026	December 1st, 2026

MERIDIAN TOWNSHIP HOPE INCOME AND ASSET GUIDELINES

To be eligible for a 100% HOPE in Meridian Township, household income and assets owned by all those living in the household that is the subject of the application may NOT exceed 135% of the Federal Poverty Level for the year. A partial 50% HOPE will be granted for qualifying applicants over the 135% threshold, and under 185% of the Federal Poverty Level for the year. For the purposes of this application, household assets do not include the value of the home or the immediate home site.

2026 MERIDIAN TOWNSHIP HOPE GUIDELINES
INCOME AND ASSET GUIDELINES

2026 Income Limits for 100% Exemption (1.35 times the Federal Guidelines)		2026 Asset Limits for 100% Exemption (1.35 times the Federal Guidelines)	
Size of Family Unit	Maximum Total Household Income	Size of Family Unit	Maximum Total Household Assets
1	\$21,128	1	\$21,128
2	\$28,553	2	\$28,553
3	\$35,978	3	\$35,978
4	\$43,403	4	\$43,403
5	\$50,828	5	\$50,828
6	\$58,253	6	\$58,253
7	\$65,678	7	\$65,678
8	\$73,103	8	\$73,103
For each additional person	\$7,425	For each additional person	\$7,425

A second tier is provided for 50% property tax exemptions for households with income or assets above 1.35 times the Federal guidelines, but with income and assets at or below 1.85 times the Federal guidelines:

2026 Income Limits for 50% Exemption (1.85 times the Federal Guidelines)		2026 Asset Limits for 50% Exemption (1.85 times the Federal Guidelines)	
Size of Family Unit	Maximum Total Household Income	Size of Family Unit	Maximum Total Household Assets
1	\$28,953	1	\$28,953
2	\$39,128	2	\$39,128
3	\$49,303	3	\$49,303
4	\$59,478	4	\$59,478
5	\$69,653	5	\$69,653
6	\$79,828	6	\$79,828
7	\$90,003	7	\$90,003
8	\$100,178	8	\$100,178
For each additional person	\$10,175	For each additional person	\$10,175

FILING FOR THE HOMEOWNER POVERTY EXEMPTION

An applicant must do all of the following ***on an annual basis to apply for HOPE:***

1. Own and occupy the property for which the exemption is requested.
2. File an application with the Township Supervisor, Township Assessor, or Township Board of Review after January 1, but before the day prior to the last day of the Board of Review on a form provided by the local assessing unit.
3. Provide proof of household income by submitting a complete and signed copy of the following, if required to file:
 - Most recent Michigan Homestead Property Tax Credit Claim (MI 1040 CR).
 - Most recent Federal and State Income Tax Returns (1040), if you are required to file, for all occupants of the home.
 - Copy of applicant's Driver's License.
4. Meet Meridian Township Maximum HOPE Income Standards described in these Guidelines.

Income verification for all persons in the home on the property. Income includes, but is not limited to the following sources:

- a. Money, wages, salaries before deductions, regular contribution from persons not living in the residence.
 - b. Net receipts from non-farm or farm self-employment. These include receipts from a person's business, professional enterprise, or partnership, after deductions for business expenses.
 - c. Regular payments from Social Security, railroad retirement, unemployment compensation, strike benefits from union funds, workers' compensation, veterans' payments, public assistance including but not limited to Family Independence Program (FIP), Supplemental Security Income (SSI), Emergency Assistance money payments, and non-federally funded General Assistance of General Relief money payments.
 - d. Alimony, child support and military family allotment.
 - e. Private pensions, government employee pensions, military retirement pay, disability pensions and regular insurance or annuity payments.
 - f. College or university scholarships, grants, fellowships and assistantships.
 - g. Dividends, interest, and net income from rentals, royalties, estates, trusts, gambling or lottery winnings.
5. Meet Meridian Township Maximum HOPE Asset Standards described in these Guidelines.

Asset verification is required to determine resources available that could be converted to cash and used to pay property taxes in the year the HOPE is filed. Asset verification includes all persons in the residence. An asset must be included if owned by a member of the household even if it is being utilized

by another person outside of the household (example: A car used by child, but owned by parent). Assets include, but are not limited to the following:

- a. A second home, land, vehicles.
 - b. Recreational vehicles such as campers, motorhomes, boats and ATV's.
 - c. Buildings other than the principal residence.
 - d. Jewelry, antiques, artworks.
 - e. Equipment, other personal property of value.
 - f. Bank accounts, stocks.
 - g. Money received from the sale of property, such as stocks, bonds, a house or car.
 - h. Withdrawals of bank deposits and borrowed money.
 - i. Gifts, loans, lump-sum inheritances and one-time insurance payments.
 - j. Food or housing received in lieu of wages and the value of food and fuel produced and consumed on farms.
 - k. Federal non-cash benefit programs such as Medicare, Medicaid, food stamps and school lunches.
6. Produce a deed, land contract, or other evidence of ownership of the property for which the HOPE is requested.
 7. Submit a complete and accurate HOPE Application. The application and all requested documents must be given to the Township Supervisor, Township Assessor, or Board of Review after being reviewed by the Human Services Department.

Please note that if an applicant does not meet both the Income and Assets Guidelines they will be denied!

For purposes of the HOPE Application, applicants are subject to investigation of their entire financial and property records by Meridian Township to verify information given or statements made to the Supervisor, Assessor, Board of Review, or Human Services Department concerning a poverty exemption application.

Under the Freedom of Information Act, all records submitted to the Board of Review are public record potentially subject to disclosure to the public.

Any willful misstatements or misrepresentations made on an Application for HOPE may constitute perjury, which under law is a felony punishable by fine or imprisonment.

An applicant may request HOPE and appeal the property's assessment to the Board of Review at their March, July, or December meeting.

Recommended documentation checklist

Copies of the following documents are recommended as applicable for all persons living in the home when applying for the HOPE.

Identification:

- Driver's license or State of Michigan ID

Proof of Income:

- Most recent Federal and State income tax returns with attachments or signed affidavit for all persons who were not required to file Federal or State income tax returns
- Most recent Michigan Homestead Property Tax Credit Claim
- Social Security benefit award letter for previous year (if lost, call 800.772.1213)
- Veterans' Benefits statement
- Michigan Department of Human Services benefits, including the Family Independence Plan (FIP), cash assistance, state disability, and Food Assistance Plan (FAP)/Bridge Card benefits
- Income from employment
- Profit and Loss statement for the previous calendar year, if self-employed
- Worker's compensation
- Unemployment benefits
- Income from renters or boarders
- Farm income
- Online payment applications and/or cash advance services such as Cash App, Venmo, Chime, etc.
- Financial help from others such as assistance paying bills, personal loans from individuals, and gifts
- Alimony or child support
- Proof of dependents residency such as school record or custody decisions
- Documentation of college or university scholarships, grants, fellowships, and assistantships

Household expenses:

- Mortgage payment or lease statements for the previous calendar year
- Homeowner's insurance for the previous calendar year
- Heat and electric bills for past 12 months (if lost, call Consumers Energy at 800.477.5050 or Board of Water and Light at 517.702.6006)

Assets:

- Bank and/or credit union statements for all savings, checking, draft, and money market accounts or shared accounts dated within 30 days and all statements for the previous calendar year
- Uncashed checks, drafts, and warrants
- Certificates of deposit: statement from financial institution or the certificate itself
- Money held by others: written statement from person holding funds
- Withdrawals of bank deposits and borrowed money
- Gifts, loans, lump-sum inheritances, and one-time insurance payments
- Long term care trust fund: written statement from facility
- Gaming/lottery winnings
- Income from sales of any assets in the last 18 months
- Stocks, bonds: written statement from broker or company
- Lump sum and accumulated benefits
- Vehicles – title, proof of insurance, registration, loan statement, or payment book to any cars, trucks, snowmobiles, campers, boats, farm equipment, motorcycles, and trailers
- Real estate or property: property tax assessment or certified statement of value or county records (primary residence/homestead excluded)
- Most recent pension and/or Individual Retirement Account (IRA) statement and all statements for the previous calendar year for all accounts
- Burial assets, prepaid funerals and life insurance: all statements for the previous calendar year
- Documentation of other assets of value: jewelry, antiques, artworks, equipment, etc

This is not an exhaustive list. Further documentation may be requested at the discretion of the Assessing Department.

Do not submit original documents.

Items submitted for consideration will not be returned.

Meridian Township does not provide copies.

****Incomplete applications will be denied****

Application and Affirmation for MCL 211.7u Poverty Exemption

This form is issued under the authority of the General Property Tax Act, Public Act 206 of 1893, MCL 211.7u.

MCL 211.7u of the General Property Tax Act, Public Act 206 of 1893, provides a property tax exemption for the principal residence of persons who, by reason of poverty, are unable to contribute toward the public charges. This application is to be used to apply for the exemption and must be filed with the Board of Review where the property is located. This application may be submitted to the city or township where the property is located in each year on or after January 1 but before the day prior to the last day of the board of review. Poverty Exemptions may be heard by the Board of Review during its March, July, and December sessions.

To be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application. Please write legibly and attach additional pages as necessary.

PART 1: PERSONAL INFORMATION — Petitioner must list all required personal information.				
Petitioner's Name			Daytime Phone Number	
Age of Petitioner	Marital Status	Age of Spouse	Number of Legal Dependents	
Property Address of Principal Residence		City	State	ZIP Code
PART 2: REAL ESTATE INFORMATION				
List the real estate information related to your principal residence. Be prepared to provide a deed, land contract or other evidence of ownership of the property at the Board of Review meeting.				
Property Parcel Identification Number		Name of Mortgage Company		
Unpaid Balance Owed on Principal Residence	Monthly Payment	Length of Time at this Residence		
Property Description				
PART 3: AFFIRMATION OF OWNERSHIP, OCCUPANCY, AND INCOME STATUS (Check all boxes that apply.)				
<input type="checkbox"/> I own the property in which the exemption is being claimed.				
<input type="checkbox"/> The property in which the exemption is being claimed is used as my homestead. Homestead is generally defined as any dwelling with its land and buildings where a family makes its home.				
PART 4: ADDITIONAL PROPERTY INFORMATION				
List information related to any other property owned by you or any member residing in the household.				
<input type="checkbox"/> Check if you own, or are buying, other property. If checked, complete the information below.			Amount of Income Earned from other Property	
1	Property Address	City	State	ZIP Code
	Name of Owner(s)	Assessed Value	Date of Last Taxes Paid	Amount of Taxes Paid
2	Property Address	City	State	ZIP Code
	Name of Owner(s)	Assessed Value	Date of Last Taxes Paid	Amount of Taxes Paid

PART 5: EMPLOYMENT INFORMATION — List your current employment information.

Name of Employer			
Address of Employer	City	State	ZIP Code
Contact Person	Employer Telephone Number		

PART 6: INCOME SOURCES

List all income sources, including but not limited to: salaries, Social Security, rents, pensions, IRAs (individual retirement accounts), unemployment compensation, disability, government pensions, worker's compensation, dividends, claims and judgments from lawsuits, alimony, child support, friend or family contribution, reverse mortgage, or any other source of income, for all persons residing at the property.

Source of Income	Monthly or Annual Income (indicate which)

PART 7: CHECKING, SAVINGS AND INVESTMENT INFORMATION

List any and all savings owned by all household members, including but not limited to: checking accounts, savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments, for all persons residing at the property.

Name of Financial Institution or Investments	Amount on Deposit	Current Interest Rate	Name on Account	Value of Investment

PART 8: LIFE INSURANCE — List all policies held by all household members.

Name of Insured	Amount of Policy	Monthly Payments	Policy Paid in Full	Name of Beneficiary	Relationship to Insured

PART 9: MOTOR VEHICLE INFORMATION

All motor vehicles (including motorcycles, motor homes, camper trailers, etc.) held or owned by any person residing within the household must be listed.

Make	Year	Monthly Payment	Balance Owed

PART 10: HOUSEHOLD OCCUPANTS — List all persons living in the household.				
First and Last Name	Age	Relationship to Applicant	Place of Employment	\$ Contribution to Family Income

PART 11: PERSONAL DEBT — List all personal debt for all household members.					
Creditor	Purpose of Debt	Date of Debt	Original Balance	Monthly Payment	Balance Owed

PART 12: MONTHLY EXPENSE INFORMATION			
The amount of monthly expenses related to the principal residence for each category must be listed. Indicate N/A as necessary.			
Heating	Electric	Water	Phone
Cable	Food	Clothing	Health Insurance
Garbage	Daycare	Car Expense (gas, repair, etc.)	
Other (type and amount)	Other (type and amount)	Other (type and amount)	
Other (type and amount)	Other (type and amount)	Other (type and amount)	

NOTICE: Per MCL 211.7u(2)(b), federal and state income tax returns for all persons residing in the principal residence, including any property tax credit returns, filed in the immediately preceding year or in the current year must be submitted with this application. Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return in the tax year in which the exemption under this section is claimed or in the immediately preceding tax year.

PART 13: POLICY AND GUIDELINES ACKNOWLEDGMENT

The governing body of the local assessing unit shall determine and make available to the public the policy and guidelines used for the granting of exemptions under MCL 211.7u. In order to be eligible for the exemption, the applicant must meet the federal poverty guidelines published in the prior calendar year in the Federal Register by the United States Department of Health and Human Services under its authority to revise the poverty line under 42 USC 9902, or alternative guidelines adopted by the governing body of the local assessing unit so long as the alternative guidelines do not provide income eligibility requirements less than the federal guidelines. The policy and guidelines must include, but are not limited to, the specific income and asset levels of the claimant and total household income and assets. The combined assets of all persons must not exceed the limits set forth in the guidelines adopted by the local assessing unit.

The applicant has reviewed the applicable policy and guidelines adopted by the city or township, including the specific income and asset levels of the claimant and total household income and assets.

PART 14: LEGAL DESIGNEE INFORMATION (Complete if applicable.)

Legal Designee Name		Daytime Telephone Number	
Mailing Address	City	State	ZIP Code

PART 15: CERTIFICATION

I hereby certify to the best of my knowledge that the information provided in this form is complete, accurate and I am eligible for the exemption from property taxes pursuant to Michigan Compiled Law, Section 211.7u.

Printed Name	Signature	Date
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This application shall be filed after January 1, but before the day prior to the last day of the local unit's December Board of Review.

Decision of the March Board of Review may be appealed by petition to the Michigan Tax Tribunal by July 31 of the current year. A July or December Board of Review decision may be appealed to the Michigan Tax Tribunal by petition within 30 days of decision. A copy of the Board of Review decision must be included with the petition.

Michigan Tax Tribunal
PO Box 30232
Lansing MI 48909

Phone: 517-335-9760
Email: taxtrib@michigan.gov

Poverty Exemption Affidavit

This form is issued under authority of Public Act 206 of 1893; MCL 211.7u.

INSTRUCTIONS: When completed, this document must accompany a taxpayer's Application for Poverty Exemption filed with the supervisor or the board of review of the local unit where the property is located. MCL 211.7u provides for a whole or partial property tax exemption on the principal residence of an owner of the property by reason of poverty and the inability to contribute toward the public charges. MCL 211.7u(2)(b) requires proof of eligibility for the exemption be provided to the board of review by supplying copies of federal and state income tax returns for all persons residing in the principal residence, including property tax credit returns, or by filing an affidavit for all persons residing in the residence who were not required to file federal or state income tax returns for the current or preceding tax year.

I, _____, swear and affirm by my signature below that I reside in the principal residence that is the subject of this Application for Poverty Exemption and that for the current tax year and the preceding tax year, I was not required to file a federal or state income tax return.

Address of Principal Residence: _____

Signature of Person Making Affidavit

Date